

## UNITED STATES DISTRICT COURT

for the  
Eastern District of Pennsylvania

Case No. \_\_\_\_\_

(to be filled in by the Clerk's Office)

Dale T. Cooper

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Allegheny County Bureau of Corrections  
Warden Orlando L. Harper  
Chief Medical Assistant  
Corrections Officer J. Brown  
Nurse John/Jane Doe

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

## COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

## NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

The Clerk will not file a civil complaint unless the person seeking relief pays the entire filing fee (currently \$350) and an administrative fee (currently \$52) in advance, or the person applies for and is granted in forma pauperis status pursuant to 28 U.S.C. § 1915. A prisoner who seeks to proceed in forma pauperis must submit to the Clerk (1) a completed affidavit of poverty and (2) a copy of the trust fund account statement for the prisoner for the six month period immediately preceding the filing of the complaint, obtained from and certified as correct by the appropriate official of each prison at which the prisoner is or was confined for the preceding six months. See 28 U.S.C. § 1915(a)(2).

If the Judge enters an order granting a prisoner's application to proceed in forma pauperis, then the order will assess the filing fee (currently \$350) against the prisoner and collect the fee by directing the agency having custody of the prisoner to deduct an initial partial filing fee equal to 20% of the greater of the average monthly deposits to the prison account or the average monthly balance in the prison account for the six-month period immediately preceding the filing of the complaint, as well as monthly installment payments equal to 20% of the preceding month's income credited to the account for each month that the balance of the account exceeds \$10.00, until the entire filing fee has been paid. See 28 U.S.C. § 1915(b). **A prisoner who is granted leave to proceed in forma pauperis is obligated to pay the entire filing fee regardless of the outcome of the proceeding, and is not entitled to the return of any payments made toward the fee.**

**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name Dale T. Cooper  
 All other names by which  
 you have been known: \_\_\_\_\_  
 ID Number Q66974  
 Current Institution SCI Somerset  
 Address 1590 Walters Mill Road  
Somerset PA 15510  
City State Zip Code

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

**Defendant No. 1**

Name Allegheny County Bureau of Corrections  
 Job or Title (*if known*) \_\_\_\_\_  
 Shield Number \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
Pittsburgh PA \_\_\_\_\_  
City State Zip Code  
☐ Individual capacity ☒ Official capacity

**Defendant No. 2**

Name Orlando L. Harper  
 Job or Title (*if known*) Warden; Allegheny County Jail  
 Shield Number \_\_\_\_\_  
 Employer Allegheny County  
 Address \_\_\_\_\_  
Pittsburgh PA \_\_\_\_\_  
City State Zip Code  
☒ Individual capacity ☒ Official capacity

## Defendant No. 3

Name

Job or Title (if known)

Shield Number

Employer

Address

Chief Medical Assistant

Allegheny County

Pittsburgh

City

PA

State

Zip Code



Individual capacity



Official capacity

## Defendant No. 4

Name

Job or Title (if known)

Shield Number

Employer

Address

J. Brown

Corrections Officer

Allegheny County

Pittsburgh

City

PA

State

Zip Code



Individual capacity



Official capacity

## II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

Federal officials (a *Bivens* claim)

State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

(Please See Attached)  
Defendant Chief Medical Assistant failed to follow orders + remove stitches. No medical aid was rendered in spite of numerous sick call request slips, leaving Plaintiff with excruciating pain, migraine headaches and inability to perform daily functions. Defendant Brown failed to respond to inmate assaults, broke protocol. Defendant Harper's failure to train staff led to created hazardous and dangerous environments within Allegheny County Jail.

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?



- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed. *Please see attached*
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### III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (*explain*) \_\_\_\_\_
- 

### IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.
- 

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

*On Wednesday June 26<sup>th</sup> 2019 at approx. 8:00am within  
POD 4-C of the Allegheny County Jail*

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C. What date and approximate time did the events giving rise to your claim(s) occur?

June 26<sup>th</sup>, 2019 8:00 am

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?) Plaintiff Cooper was assaulted with an inmate food tray resulting in a broken nose, two black eyes. Officer failed to intervene causing more injury than would have occurred had the officer been trained. Medical aid was inadequately provided and requests for assistance were ignored

## V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive. Plaintiff's nose was broken and both eyes were blackened. Medical aid was insufficient and stitches were not removed in a timely manner causing migraine headaches and inability to perform daily activities

## VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Issue and arrange to have the Plaintiff's nose fixed  
Award compensatory damages in the amount of:  
\$100,000 jointly and severally against defendants Harper & Brown  
\$50,000 against chief Medical assistant  
Punitive Damages in the amount of  
\$50,000 against defendant Harper  
\$25,000 against defendant Brown

**VII. Exhaustion of Administrative Remedies Administrative Procedures**

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

- A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Allegheny County Jail

- B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

- C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☐ Yes

☒ No

☐ Do not know

If yes, which claim(s)?

\_\_\_\_\_

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☒ No

- E. If you did file a grievance:

1. Where did you file the grievance?

Allegheny County Jail

2. What did you claim in your grievance?

The afore mentioned issues

3. What was the result, if any?

No results

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. *(Describe all efforts to appeal to the highest level of the grievance process.)*



F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.) Please See attached information

### VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☐ Yes

☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.



- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes

☒ No

- B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court *(if federal court, name the district; if state court, name the county and State)*

\_\_\_\_\_

3. Docket or index number

\_\_\_\_\_

4. Name of Judge assigned to your case

\_\_\_\_\_

5. Approximate date of filing lawsuit

\_\_\_\_\_

6. Is the case still pending?

☐ Yes

☒ No

If no, give the approximate date of disposition. \_\_\_\_\_

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

\_\_\_\_\_

- C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

E.D.Pa. AO Pro Se 14 ( Rev. 01/21) Complaint for Violation of Civil Rights

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☐ Yes

☐ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court *(if federal court, name the district; if state court, name the county and State)*

\_\_\_\_\_

3. Docket or index number

\_\_\_\_\_

4. Name of Judge assigned to your case

\_\_\_\_\_

5. Approximate date of filing lawsuit

\_\_\_\_\_

6. Is the case still pending?

☐ Yes

☐ No

If no, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

\_\_\_\_\_

**IX. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:


5/14/21

Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

  
 Dale T. Cooper  
 Q66974 SCI Somerset  
 1590 Walters Mill Road  
 Somerset PA 15010  
City State Zip Code

**B. For Attorneys**

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

E-mail Address



Dale T. Cooper  
 V.  
 Allegheny County Bureau of Corrections  
 Warden Orlando L. Harper  
 Chief Medical Assistant John/Jane Doe  
 Correctional Officer J. Brown  
 Nurse John/Jane Doe

United States District Court  
 Western District of Pennsylvania  
 Case No.:  
 Honorable Judge:  
 Complaint with Jury Demand

### Introduction

This is a civil rights action filed by Dale Cooper, A pre-trial detainee housed in the Allegheny County Bureau of Corrections in the care, custody, and control of defendant Orlando L. Harper. Plaintiff sues for damages and injunctive relief under 42 U.S.C. § 1983 Alleging Failure to protect, Failure to intervene and denial of a serious medical need, Failure to carry out a doctors orders. All in violation of the eighth and Fourteenth amend. to the United States constitution.

### Jurisdiction

1) The court has jurisdiction over plaintiff's claims of violation of Federal constitutional rights under 42 U.S.C. §§ 1331(1) and 1343.

### Parties

2) Plaintiff Dale T. Cooper is incarcerated at Allegheny County Jail during the events described in this complaint.

3) Defendant Allegheny County Bureau of Corrections is the institution for which this plaintiff is housed in. Sued in its official capacity only

4) Defendant Orlando L. Harper is the warden of Allegheny County Bureau of Corrections. All prisoners in his institution are under his care, custody and control. He is also charged with training staff. He is sued in his individual and official capacities.

5) Defendant John/Jane Doe is the Chief Medical Assistant at the Allegheny County Jail. He/She is sued in the individual and official capacities



6) Defendant J. Brown is a Correctional Officer at the Allegheny County Jail. He is sued in his individual capacity only.

7) Defendant John/Jane Doe is the Nurse/Doctor whom was supposed to take out the plaintiff's stitches. He/She is sued in their individual capacity only.

8) All the defendants have acted and continue to act under color of state law at all times relevant to this complaint.

### Facts

9) On Wednesday June 26<sup>th</sup> 2019 at approx. 8:00am the Allegheny County Bureau of Corrections Institution was on an institutional lock down. All inmates were to be secured in their cells nix the pod workers.

10) Plaintiff Cooper was a pod worker on unit H-C which is an high security segregated unit with two officers working the pod.

11) This plaintiff had the job of passing out Food trays to the inmates locked in their cells.

12) Defendant J. Brown broke protocol allowing inmates to exit their cells during a lock down.

13) Inmates were eating and after trays were over this plaintiff stood in close proximity to defendant Brown to collect trays when defendant Brown called trays over

14) During this time inmate Johnathan Coles struck this plaintiff with a Food tray across his face breaking this plaintiff's nose. He then struck this plaintiff again with the tray further busting the plaintiff's nose and blacking both of the plaintiff's eyes.

15) Defendant Brown ran away and watched the assault without intervening.

16) An all staff's code-2 was called and several officers arrived and broke up the assault. Immediately this plaintiff was handcuffed, roughed up and taken into the sally port area of the unit.

17) This plaintiff was taken to the medical unit and was given a cursory glance by defendant John/Jane Doe Nurse and was stitched up with



three stitches on the bridge of this plaintiff's nose.

18) Defendant John/Jane Doe ordered that this plaintiff have his stitches removed within five to six days.

19) Defendant Chief Medical Assistant John/Jane Doe failed to carry out the orders of defendant John/Jane Doe and take out the stitches.

20) This plaintiff wrote numerous sick call request slips requesting that his broken nose be tended to by defendant Chief Medical Assistant John/Jane Doe and defendant nurse John/Jane Doe. Plaintiff was not given any medical care treatment.

21) Plaintiff is in excruciating pain with migraine type headaches and can barely function adequately. His major life activities are hindered because his eye sight gets blurry when he sneezes intensifying his migraine like headaches.

22) Defendant Harper failed to train defendant Brown in dealing with inmate on inmate assaults which created a hazardous and dangerous environment within the Allegheny County Jail. His deliberate and intentional acts and omissions were with reckless disregard for inmate safety.

23) Defendant Harper's callous and reckless disregard for inmate safety resulted in this plaintiff being assaulted.

24) Defendant Harper's failure to train defendant Brown in dealing with inmate on inmate assaults resulted in defendant Brown not intervening and allowing this plaintiff to be assaulted in front of him.

25) Defendant Chief Medical Assistant John/Jane Doe is responsible for medical care generally and is required to arrange for specialized medical care within and outside of the jail.

26) Defendant Nurse John/Jane Doe is responsible for attending to all inmate medical complaints.

### Exhaustion of Administrative Remedies

27) The plaintiff has exhausted his administrative remedies with respect to all claims and all defendants.

### Claims For Relief

28) 11 P.D. 112

P.D. 112



28) The Actions of defendant Brown in Failing to intervene to protect this plaintiff from the inmate on inmate assault by inmate Coles was done maliciously and sadistically and constituted cruel and unusual punishment in violation of the eighth amendment of the United States Constitution.

29) The actions of defendant Harper in Failing to train defendant Brown on inmate on inmate assault constituted deliberate indifference to the plaintiffs and other prisoners safety and contributed to and proximately caused the above-described violation of eighth amendment rights.

30) The actions of defendants Chief Medical Assistant and Nurse John/Jane Doe constituted denial of medical for a serious medical need violates the eighth amendment.

Requested Relief

Wherefore the plaintiff requests that the court grant the following relief:

A) Issue a declaratory judgement stating that:

1) The failure of defendant Harper to train defendant Brown on dealing with inmate on inmate assault recklessly caused the plaintiff to be assaulted without staff intervention.

2) The failure of defendant Brown to intervene resulted in the plaintiff being assaulted.

3) The failures of defendants Chief Medical Assistant and Nurse John/Jane Doe to properly attend to plaintiff's wounds resulted in the wanton use of unnecessary physical pain to be inflicted upon the plaintiff.

B) Issue an injunction ordering defendants Harper, Chief Medical Assistant and Nurse John/Jane Doe to

1) Immediately arrange for the plaintiff to be taken to an outside hospital to get his nose fixed

2) Immediately place a keep separate separation on inmate Coles and the plaintiff

C) Award compensatory damages in the amount of:

1) \$100,000 jointly and severally against defendants Harper and Brown

2) \$50,000 jointly and severally against defendants Chief Medical Assistant John/Jane Doe and Nurse John/Jane Doe

D) Award punitive damages in the amount of:

1) \$50,000 against Defendant Harper

2) \$25,000 against Defendant Brown

E) Grant any other relief as it may appear that this plaintiff is entitled.

8/20/20

*Dale T. Cooper*

Dale T. Cooper

D-# 111112



SCI Somerset  
Dale Cooper  
QG6974  
1590 Walters Mill Road  
Somerset, PA 15510



United States District  
Court Eastern District of  
Pennsylvania

601 Market St.

Clerks Office room 2609

Philadelphia PA

19106

U.S. 3.  
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